

12-13-06

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22474 7590 09/15/2006

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Barbara C. Brown	(Depositor's name)
<i>Barbara C. Brown</i>	(Signature)
12-12-2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/824,380	04/15/2004	Jeffrey Gullicksen	10.0404.DIV	6623

TITLE OF INVENTION: VIRTUAL LINE SWITCHED RING (VLSR) CONNECTION STATE DISTRIBUTION 137284884ECNEGA2 00000036 10824380

01 FC:1501 1400.00 OP
 02 FC:1504 300.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/15/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
DUONG, FRANK	2616	370-224000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	<u>CLEMENTS WALKER</u>
<input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.	<u>Christopher L. Bernard</u>
<u>Tyler S. Brown</u>	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CIENA Corporation

Linthicum, MD

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

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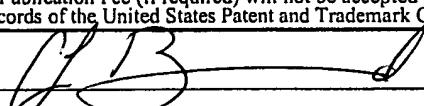
A check is enclosed.
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature



Typed or printed name Christopher L. Bernard

Date December 12, 2006

Registration No. 48,234

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Date of Deposit: - December 12, 2006

Document(s): - PART B - FEE(S) Transmittal (PTOL-85)
- Fee Address Indication Form (PTO-47)
- Credit Card Payment Form (PTO-2038)
- Postcard Filing Receipt

Application No.: - 10/824,380

Filing Date: - April 15, 2004

Applicant(s): - Jeffrey GULLICKSEN *et al.*

Title: - VIRTUAL LINE SWITCHED RING (VLSR)
CONNECTION STATE DISTRIBUTION
SCHEME

Examiner: - Frank Duong

Art Unit: - 2616

Attorney Docket No.: - 10.0404.DIV

I hereby certify that the above-referenced documents are being/have been deposited with the United States Postal Service "Express Mail - Post Office to Addressee" in accordance with 37 CFR 1.10 on the above-referenced date and are being/have been addressed to: **Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 USA.**

Barbara C. Brown
Barbara C. Brown
North Carolina State Bar/Certified Paralegal